

M. GALE LEMMON #4363  
Assistant Attorney General  
MARK L. SHURTLEFF #4666  
Attorney General  
Attorneys for Utah Insurance Department  
State Office Building, Room 3110  
Salt Lake City, UT 84114  
Telephone (801) 538-3872

**BEFORE THE INSURANCE COMMISSIONER  
OF THE STATE OF UTAH**

**COMPLAINANT:**

UTAH INSURANCE DEPARTMENT

**RESPONDENT:**

TRANSAMERICA LIFE INSURANCE CO.  
Attn: Cheryl Bock, General Manager,  
Contract Development  
Transamerica Life Insurance Company  
4333 Edgewood Road NE  
Cedar Rapids, IA 52499  
NAIC Identification No. 86231

**NOTICE OF INFORMAL  
ADJUDICATIVE PROCEEDING  
AND ORDER**

**Failure to Accurately Certify**

DOCKET No. 2006-028 LF

Enf. Case No. 1766

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Annotated (U.C.A.) §§ 31A-2-101 and 63-46b-3 and Utah Administrative Code (U.A.C.) Rule R590-160. Based upon information contained in agency files or known to the Commissioner, the Commissioner makes the following:

**FINDINGS OF FACT**

1. Respondent is an authorized life insurance company in the State of Utah.
2. Respondent submitted Utah Life Insurance Filing Certification (Certification) to the

Commissioner, dated January 18, 2006, in connection with the filing of Respondent's form TL02 1005 UT.

3. Respondent's form TL02 1005 UT contained a provision that had already been prohibited from use by the Commissioner in a previous filing.

4. Respondent falsely certified on the Certification that the "Nothing in this filing has been prohibited or disapproved in previous filings."

Having entered his Findings of Fact, the Commissioner now enters his:

#### **CONCLUSIONS OF LAW**

In falsely certifying to the Commissioner that the nothing in the filing had been previously prohibited or disapproved, Respondent violated U.C.A. 31A-2-202(6) and U.A.C. Rule R590-226-5(1).

Based upon the foregoing Findings of Fact and Conclusions of Law, the Commissioner now enters the following:

#### **ORDER**

#### **IT IS HEREBY ORDERED:**

1. Respondent shall pay an administrative forfeiture in the amount of \$1,000.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.

2. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

### **NOTIFICATION**

If you request a hearing regarding this matter, the department will be represented by M. Gale Lemmon, Assistant Attorney General, State Office Building, Room 3110, Salt Lake City, Utah 84114, Telephone Number (801) 538-3800. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$5,000.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

**Questions regarding this Adjudicative Proceeding should be directed to Randy Overstreet, at the Utah Insurance Department (801) 538-3645.**

DATED THIS 10<sup>th</sup> day of April, 2006.

D. KENT MICHIE  
INSURANCE COMMISSIONER



MARK E. KLEINFELD, JD  
ADMINISTRATIVE LAW JUDGE  
Utah Insurance Department  
State Office Building, Room 3110  
Salt Lake City, Utah 84114  
Telephone (801) 538-3800

CERTIFICATE OF MAILING

I do hereby certify that on this date I mailed, by regular mail, postage prepaid, a true and correct copy of the attached:

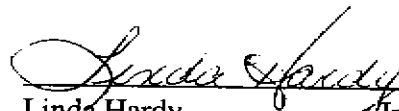
**NOTICE OF INFORMAL ADJUDICATIVE  
PROCEEDING & ORDER**

To the following:

**TRANSAMERICA LIFE INSURANCE CO.**

**Attn: Cheryl Bock  
4333 Edgewood Road NE  
Cedar Rapids, IA 52499**

DATED this 10<sup>th</sup> day of April, 2006

  
Linda Hardy Insurance Technician  
Utah Department of Insurance  
State Office Building, Room 3110  
Salt Lake City, UT 84114-6901  
(801) 538-8138

**UTAH  
Invoice**

Page 1

Printed Date: April 10, 2006

Invoice Date: April 10, 2006  
Balance Due: \$1,000.00  
Due Date: May 10, 2006  
Invoice ID: 285751

TRANSAMERICA LIFE INSURANCE COMPANY  
4333 EDGEWOOD ROAD N E  
CEDAR RAPIDS IA 52499

**Item Description**

Monetary Penalty Agency

**Amount**

\$1,000.00

**Original Amount Due**

\$1,000.00

E-Case 1766 Docket 2006-028 LF

---

E-Case 1766 Docket 2006-028 LF

**UTAH  
Invoice**

Printed Date: April 10, 2006

Invoice Date: April 10, 2006  
Balance Due: \$1,000.00  
Due Date: May 10, 2006  
Invoice ID: 285751

Make checks payable to: Utah Insurance Department

Send payment to:

Utah Insurance Department  
3110 State Office Building  
Salt Lake City, UT 84114-6901

Detach and Return with Payment